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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

2009

For calendar ye	gr 2009, or tax	year beginning	 -	, and ending		
G Check all tha	ıt apply:	Initial return		ormer public charity	Final retu	rn
		Amended return	Address chan	ge	Name change	
use the IKS	Name of foundati	ion			A Employer identificati	on number
label. Otherwise, R		HILDA TAKEYAN	IA FOINDATION		99-034219	6
· -		or PO box number if mail is not d		Room/suite	B Telephone number	<u> </u>
F	•	STREET MALL	•	610	(808)526-	2416
~~~ ~~ <u> </u>	City or town, state			010	C If exemption application is	
INCTILITIONS I	ONOLULU				D 1. Foreign organization	
H Check type of		X Section 501(c)(3) e	xempt private foundation		2 Foreign organizations check here and attach	meeting the 85% test,
	=	kempt charitable trust	Other taxable private founda	ation		
	alue of all assets		ing method: X Cash	Accrual	<ul> <li>E If private foundation s under section 507(b)(</li> </ul>	
	, col. (c), line 10	·   —	ther (specify)			a 60-month termination
▶\$		79,824. (Part I, coll		basis.)	under section 507(b)	
Part I Ana			(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(The nece	total of amounts in i ssarily equal the am	e and Expenses columns (b), (c), and (d) may not nounts in column (a) )	expenses per books	income	income	for charitable purposes (cash basis only)
		rants, etc., received	100,000.		N/A	
2 Check	. —	dation is not required to attach Sch. B				
3 Interes	st on savings and te	emporary	5,214.	5,214.	•	STATEMENT 1
	ends and interest	t from securities	9,584.	9,584.		STATEMENT 2
5a Gross	s rents					
1) Net re	ntal income or (loss)					
6a Net ga		e of assets not on line 10	-48,662.			
b Gross assets 7 Capita	sales price for all on line 6a	<u> 26,934.</u>				
7 Capita	il gain net income (fi	rom Part IV, line 2)		0.		
8 Nets	hort-term capıtal	gain				
9 Incor	ne modifications.					
10a and al	sales less returns lowarces	ECEIVED 1				
b Less	Cost of go <del>ods sol</del> d-	ا ا				
	s prof <b>igo</b> r (loss)					
	1. 1	JG 1 1 2010 (수)	5,884.	0.		STATEMENT 3
	Add lines 1 thre		72,020.	14,798.		<del>                                     </del>
13 Comp	ensation of officers.	es and wages	0.	0.	-	0
		<del>-</del>				
	ion plans, emplo	yee denems				
16a Legal		STMT 4	3,400.	0.	<del>                                     </del>	0
	unting fees professional fee		3,400		<del> </del>	<del>                                     </del>
9 17 Intere		<i>,</i>			-	
18 Taxes		STMT 5	503.	0.		0
19 Depre	s eciation and depl		303.			
E 20 Occu	pancy				<del>-</del>	
21 Trave	el, conferences, a	ınd meetinas	436.	0.		0
	ng and publication	<del>-</del>				
2 23 Other	expenses	STMT 6	19.	0.		0
⊑	operating and a					
expe	nses. Add lines		4,358.	0.		0
25 Contr	ributions, gifts, g		39,612.			39,612
l l	expenses and d					
	ines 24 and 25		43,970.	0.		39,612
	act line 26 from	line 12:				
l l		xpenses and disbursements	28,050.		<u> </u>	
ı		ne (if negative, enter -0-)		14,798.		
		(if negative, enter -0-)			N/A	

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (2009)

99-0342196 ROY AND HILDA TAKEYAMA FOUNDATION Form 990-PF (2009) Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year Part II (c) Fair Market Value (a) Book Value (b) Book Value 165,292. 165,292. 3,520 1 Cash - non-interest-bearing 98,000 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts > 4 Pledges receivable ► Less: allowance for doubtful accounts > Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and toans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 702,158. 740,568. 614,532. STMT 7 **b** Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment, basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 867,450 779,824. 842,088. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 6,000. 3,312. 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe > 6,000. 3,312. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here **▶** X and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds Net Assets 0. 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 836,088. 864,138. 29 Retained earnings, accumulated income, endowment, or other funds 836,088 864,138. 30 Total net assets or fund balances 842,088 867,450 31 Total liabilities and net assets/fund_balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 836,088. (must agree with end-of-year figure reported on prior year's return) 28,050. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 4 Decreases not included in line 2 (itemize) 864,138. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form **990-PF** (2009)

	AND HILDA TAKEY			<u> </u>		99-034	2196 Page 3
	and Losses for Tax on Ir		Income	1/h) How or	aurad T	<del></del>	1
	ribe the kind(s) of property sold (e.g irehouse; or common stock, 200 shs			(b) How ac	hase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
	<del></del>	5. IVILO 00.)		D - Dona		11/05/03	07/15/09
	OF AMERICA		·	<del>  -</del>	<u> </u>	11/05/03	01/13/09
<u>b</u>		-					
c d			<del></del>				
e				<del> </del>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		•	(h) Gain or (loss (e) plus (f) minus	
a 26,934.			75,59	6.	-		-48,662
b							
C							<u></u>
d							
_e		<u></u>				· · · <del> · ·</del>	<del></del>
Complete only for assets showing	g gain in column (h) and owned by					Gains (Col. (h) gair (k), but not less tha	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			Losses (from col.	(h)) ´
a							-48,662
b							- ··
С							
<u>d</u>							
е		L					
2 Capital gain net income or (net ca	ipital loss) { If gain, also enter If (loss), enter -0	r ın Part I, line - ın Part I, line	7 7	} _2			-48,662
3 Net short-term capital gain or (los	•						
If gain, also enter in Part I, line 8,		(-).		}			
If (loss), enter -0- in Part I, line 8				3	L	N/A	<u> </u>
Part V   Qualification U	nder Section 4940(e) for	. Heanced	lax on Net	investn	nent inc	ome	
(For optional use by domestic private	e foundations subject to the section	4940(a) tax on	net investment ii	ncome.)			
If section 4940(d)(2) applies, leave the	his part blank.						
				10			<b></b>
Was the foundation liable for the sec				LIOGA			X Yes No
If "Yes," the foundation does not qual  1 Enter the appropriate amount in	each column for each year; see instr			IPS		<del></del>	<del></del>
(a)		uctions before	making any ena			T	(d) bution ratio
Base periód years Calendar year (or tax year beginni	ng in) Adjusted qualifying dis	stributions	Net value of no	(c) oncharitable-	use assets	Distri (col. (b) di	bùtión ratio vided by col. (c))
2008	ing in)					(0012 (0) 01	VIGOG BY GOI. (6))
2007						· · · · · ·	
2006						-	
2005							
2004							
2 Total of line 1, column (d)						2	
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5,	or by the numbe	r of years			
the foundation has been in existe	nce if less than 5 years					3	
4 Enter the net value of noncharitat	ole-use assets for 2009 from Part X,	line 5				4	
5 Multiply line 4 by line 3						_5	
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6	·
7 Add lines 5 and 6						7	
	B						
8 Enter qualifying distributions from If line 8 is equal to or greater than	n Part XII, line 4 n line 7, check the box in Part VI, line	e 1b, and comi	olete that part usi	ng a 1% tax	rate.		· <del></del> -
See the Part VI instructions.	<u> </u>	· '					

Form	990-PF (2009) ROY AND HILDA TAKEYAMA FOUN			03421			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section	4940(a), 4940(b), 4940(e),	or 4948	- see in	stru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on line 1.		1			
	Date of ruling or determination letter: (attach copy of lette	r if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check he	ere 🕨 🔙 and enter 1%	1_			2	96.
	of Part I, line 27b		ŀ				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations er	nter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations of	only. Others enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2		3			2	96.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	)-	5			2	96.
6	Credits/Payments:						
а	2009 estimated tax payments and 2008 overpayment credited to 2009	6a 1,68	8.				
b	Exempt foreign organizations - tax withheld at source	6b					
C	Tax paid with application for extension of time to file (Form 8868)	6c					
d	Backup withholding erroneously withheld	6d					
	Total credits and payments. Add lines 6a through 6d		7			1,6	88.
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220	is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overp		10			<u>1,3</u>	92.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	1,392. Refunded	<u>▶ 11</u>	<u> </u>			0.
	rt VII-A Statements Regarding Activities					Vaa	NI-
	During the tax year, did the foundation attempt to influence any national, state, or local	al legislation or did it participate or inter	vene in			Yes	
	any political campaign?		١.0	_	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political	The state of the s		-	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	es and copies of any materials pub	iisnea or				
	distributed by the foundation in connection with the activities						
	Did the foundation file Form 1120-POL for this year?	and the year			1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed dur  (1) On the foundation.   \$ 0. (2) On foundation ma		0.				
	Enter the reimbursement (if any) paid by the foundation during the year for political e		<u> </u>				
	managers. > \$ 0.	experientare tax imposed on foundation					
	Has the foundation engaged in any activities that have not previously been reported to	o the IRS?			2		x
	If "Yes," attach a detailed description of the activities.				-		
	Has the foundation made any changes, not previously reported to the IRS, in its gove	erning instrument, articles of incorporat	ion, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the c	•	,		3		х
	Did the foundation have unrelated business gross income of \$1,000 or more during to	_			4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?		N	I/A [	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the	e year?			5		X
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfies	sfied either:					
	By language in the governing instrument, or						
	ullet By state legislation that effectively amends the governing instrument so that no ma	indatory directions that conflict with the	state law				
	remain in the governing instrument?				6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
	If "Yes," complete Part II, col (c), and Part XV						
8a	Enter the states to which the foundation reports or with which it is registered (see ins	structions) >					
	HI						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to $\frac{1}{2}$	o the Attorney General (or designate)					Ì
	of each state as required by General Instruction G? If "No," attach explanation				8b	<u> </u>	
	is the foundation claiming status as a private operating foundation within the meaning		r calendar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Y				9		X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a	schedule listing their names and addresses	STMI	8	10	X	

	1 990-PF (2009) ROY AND HILDA TAKEYAMA FOUNDATION 99-0342	196		Page 5
	art VII-A Statements Regarding Activities (continued)	$\overline{}$		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
'-	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	_13	X	
	Website address ► N/A			
14	The books are in care of ▶ ROY TAKEYAMA Telephone no. ▶ (808) 5	26-	241	6
	Located at ▶828 FORT STREET MALL STE 610, HONOLULU, HI ZIP+4 ▶96	813		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>&gt;</b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		•	
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		<u>X</u>
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2009?	1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2009?			
	If "Yes," list the years > ,,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	f the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	<b></b>	] !		
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose		:	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			İ
	Form 4720, to determine if the foundation had excess business holdings in 2009.) N/A	3b		<u> </u>
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		_X_
b	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			[
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		X
	Fo	rm <b>990</b>	-PF	(2009)

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orm 990-PF (2009) ROY AND HILDA TAKEYAMA F Part VII-B   Statements Regarding Activities for Which I			99-03421	96 Page 6
	01111 4720 Way Bo 1	iequii eu (contin	Jeu,	<del></del>
5a During the year did the foundation pay or incur any amount to:	* 404E(*)\Q		s X No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		·	s 🕰 NO	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly of indire	cuy,	s X No	
any voter registration drive?	•			
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?		Ye	s X No	<u> </u>
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unit	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	nere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for	rom the tax because it maintai	ned		
expenditure responsibility for the grant?		. —	s 🔲 No	
If "Yes," attach the statement required by Regulations section 53 494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pu) promumo en	☐ Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	nersonal henefit contract?		i	6b X
If "Yes" to 6b. file Form 8870.	orsonal bonone some act.			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shaltar transaction?	□v₄	s X No	
b If yes, did the foundation receive any proceeds or have any net income attribut			· — . —	7b
Information About Officers Directors Trust	ees Foundation Ma	nagers Highly		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Part VIII Paid Employees, and Contractors	ees, i ouridation ma	magers, riigini	•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
ROY Y TAKEYAMA	PRESIDENT/DIR			
3767 DIAMOND HEAD ROAD				
HONOLULU, HI 96816	0.00	0.	0.	0.
HILDA Y TAKEYAMA	V.P./ DIRECTO			
3767 DIAMOND HEAD ROAD	V.I., DIRECTO			
	0.00	0.	0.	0.
HONOLULU, HI 96816			· ·	<u> </u>
JAN N SULLIVAN	SECRETARY/DIR	ECTOR	'	
368 DUNE CIRCLE	0.00		_	^
KAILUA, HI 96834	0.00	0.	0.	0.
DAVID Y TAKEYAMA	TREASURER/DIR	ECTOR		
828 FORT STREET MALL STE 610				
HONOLULU, HI 96813	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) Evpopeo
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	l			
		<u> </u>		<u> </u>
	7			1
	1			
		-		
	1			
Total number of other employees paid over \$50,000			<b></b>	0

Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors (continued)	ees, roundation Managers, riigiliy	_
3 Five highest-paid independent contractors for professional services	s. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	· ·	
		-
Total number of others receiving over \$50,000 for professional services	1	<b>▶</b> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Inclunumber of organizations and other beneficiaries served, conferences convened, research	earch papers produced, etc.	Expenses
CONTRIBUTIONS TO CHARITABLE ORGANIZA	TIONS	
		39,612.
2		33,012.
3		
4		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation durin	on the towner on lone 1 and 0	Amount
1 N/A	ig the tax year on lines 1 and 2.	Aillouit
		_
2		
All other program-related investments. See instructions.		

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	<u>597,013.</u>
b	Average of monthly cash balances	1b	597,013. 16,306.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1đ	613,319.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	613,319.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,200.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	604,119.
6	Minimum investment return. Enter 5% of line 5	6	30,206。
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	30,206.
2a			
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C		2c	296.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	29,910.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	29,910.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	29,910.
P	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		22 (12
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	39,612.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a		3a	
b		3b	20 (10
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	39,612.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		•
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	39,612.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for	the section

Form **990-PF** (2009)

#### Part XIII Undistributed Income (see instructions)

1 Destroitable amount for 2009 from Part XI, Irin 7 2 undestinated mores, if any, as of the and of 2009 a Enter amount for 2008 only 3 Excess distributions carryover, if any, to 2009: a From 2004 b From 2005 b From 2005 b From 2006 b From 2006 b From 2007 b From 2008 c From 2009 c		(a) Corpus	(b) Years prior to 2008	(c) 2008	( <b>d</b> ) 2009
29,910.  2 Unadionulated income, if any, as at the and of 2008  2 Enter amount for 2008 only  5 Total for prior years:  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.  38,784.	1 Distributable amount for 2009 from Part XI,				
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d From 2007 e From 2008    Total of lines 3a through e	<b>b</b> From 2005				
e From 2008	<b>c</b> From 2006				
Total of lines 3a through e   0	<b>d</b> From 2007				
4 Qualitying distributions for 2009 from Part XII, Int 4: PS 39,612.  a Applied to 2008, but not more than line 2a  Applied to 2008, but not more than line 2a  Applied to undistributed income of prior years (Election required - see instructions)  c Treated as distributions out of corpus (Election required - see instructions)  d Applied to 2009 distributable amount  R Remaining amount distributed out of corpus  5 Excess distributions curprive applied to 2009 (if an amount appears in column (a))  6 Enter the net total of each column as indicated below.  1 Corpus Add lines 34, 45, and 49 Subtract line 5  b Prior years' undistributed income. Subtract line 6  b Prior years' undistributed income income for which a notice of deficiency has been issued, or on which is section 494(a) bax has been previously assessed  d Subtract line 6c from line 6b. Taxable amount - see instructions  e Undistributed income for Which a motive of the sense instructions  e Undistributed income for 2009, Subtract line 4 from line 2a. Taxable amount - see instructions  e Undistributed income for 2009, Subtract line 4 from line 2a. Taxable amount must be distributed in 2010  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b) (1)(F) or 4942(b)(3)  8 Excess distributions carryover to 2010.  Subtract lines 7 and 8 from line 6a.  10 Analysis of line 9:  2 Excess distributions carryover to 2010.  Subtract lines 7 and 8 from line 6a.  10 Analysis of line 9:  2 Excess from 2006  Excess from 2007  Excess from 2007  Excess from 2007  Excess from 2007	e From 2008				
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4a from line 2a. Taxable amount - see instr.  f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)  8 Excess distributions carryover from 2004 not applied on line 5 or line 7  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	F				
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)  8 Excess distributions carryover from 2004 not applied on line 5 or line 7  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	l l			0.	
be distributed in 2010  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)  8 Excess distributions carryover from 2004 not applied on line 5 or line 7  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	i i				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)  8 Excess distributions carryover from 2004 not applied on line 5 or line 7  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	lines 4d and 5 from line 1. This amount must				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)  8 Excess distributions carryover from 2004 not applied on line 5 or line 7  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	be distributed in 2010				29,082.
section 170(b)(1)(F) or 4942(g)(3)  8	7 Amounts treated as distributions out of				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	corpus to satisfy requirements imposed by				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7  9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	section 170(b)(1)(F) or 4942(g)(3)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	8 Excess distributions carryover from 2004				
Subtract lines 7 and 8 from line 6a  O .  Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	not applied on line 5 or line 7	0.			
Subtract lines 7 and 8 from line 6a  O .  Analysis of line 9: a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	9 Excess distributions carryover to 2010.				
a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	-	0.			
a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008	10 Analysis of line 9:				
b Excess from 2006 c Excess from 2007 d Excess from 2008	1				
<b>c</b> Excess from 2007 <b>d</b> Excess from 2008					
d Excess from 2008	<del></del>				
	<del></del>				

4...

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year HARRIS UNITED METHODIST CHURCH 20 SOUTH VINEYARD BLVD HONOLULU HAWAII, HI 96817		PUBLIC CHARITY	SUPPORT RELGIOUS ACTIVITIES	7,000.
LUNALILO HOME 501 KEKAULUOHI STREET HONOLULU, HI 96825		PUBLIC CHARITY	PROVIDE CARE FOR THE ELDERLY	100.
UNIVERSITY OF HAWAII FOUNDATION 2444 DOLE STREET #101 HONOLULU, HI 96822		PUBLIC CHARITY	ASSIST WITH EDUCATIONAL PROGRAMS	32,512.
Total			<b>▶</b> 3a	39,612.
b Approved for future payment  NONE				
None				
Total			<b>▶</b> 3b	0.

orm 990-PF (2009) ROY AND HILDA			<u>N</u>	99-0	342196 Pag
Part XVI-A Analysis of Income-Prod					
nter gross amounts unless otherwise indicated.		business income	(c) Excluded b	y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	sion	(d) Amount	Related or exempt function income
Program service revenue:	code	Amount	code	Amount	
a	_				
b	_				
C	_			.  -	
d	<u> </u>		<del>   </del>		
e					
f	_   _				
g Fees and contracts from government agencies					
Membership dues and assessments	<del></del>		<del>  </del>		
Interest on savings and temporary cash				5 014	
investments		<del></del>	14	5,214. 9,584.	
Dividends and interest from securities			14	9,584.	<u> </u>
Net rental income or (loss) from real estate:			<u> </u>		
a Debt-financed property			<del>                                     </del>		-
b Not debt-financed property			-		
Net rental income or (loss) from personal					
property		· -		+	
Other investment income			+ + -		
Gain or (loss) from sales of assets other			18	-48,662.	
than inventory  Net income or (loss) from special events	<del></del>		10	-40,002.	
Gross profit or (loss) from sales of inventory	<del></del>			-	
Other revenue:			<del>    -</del>		
a MISCELLANEOUS INCOME			14	5,884.	
				3,001.	
b	1				
d		****			
e					
Subtotal. Add columns (b), (d), and (e)		0		-27,980.	
Total. Add line 12, columns (b), (d), and (e)		_	•	13	-27,98
ee worksheet in line 13 instructions to verify calculations	i.)				
Part XVI-B Relationship of Activitie	s to the Accor	nplishment of E	Exempt P	urposes	
ine No. Explain below how each activity for which i			-A contributed	importantly to the accomp	olishment of
the foundation's exempt purposes (other the	nan by providing tund	is for such purposes).			
	<del> </del>	<del></del>			
-				<del></del>	<u> </u>
				<del></del>	
		=.	<del> · · · · · · · · · · · · · · · · · ·</del>		
				<del></del>	
		- <del></del>		<del></del>	
				<del></del>	
1					

923621 02-02-10

	eart XVII Information Regarding Transfers To a Exempt Organizations			ritable	ige is
1	Did the organization directly or indirectly engage in any of the followin	g with any other organization	described in section 501(c) of	Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 52	7, relating to political organiza	ations?		
a	a Transfers from the reporting foundation to a noncharitable exempt org	ganization of:			
	(1) Cash			1a(1)	X
	(2) Other assets			1a(2)	X
t	b Other transactions:				
	(1) Sales of assets to a noncharitable exempt organization			1b(1)	X_
	(2) Purchases of assets from a noncharitable exempt organization			1b(2)	X_
	(3) Rental of facilities, equipment, or other assets			1b(3)	X
	(4) Reimbursement arrangements			1b(4)	X
	(5) Loans or loan guarantees			1b(5)	X
	(6) Performance of services or membership or fundraising solicitation	ns		16(6)	X
	c Sharing of facilities, equipment, mailing lists, other assets, or paid em	•		1c	X
(	d If the answer to any of the above is "Yes," complete the following sche	• •			
	or services given by the reporting foundation. If the foundation receive	ed less than fair market value	in any transaction or sharing arrangement,	show in	
	column (d) the value of the goods, other assets, or services received.		1 (0		
(a)	Line no (b) Amount involved (c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions, and	sharing arrangeme	ents
	N/A				
				·····	
٠,	a Is the foundation directly or indirectly affiliated with, or related to, one	or more tay-ayamat arganiza	tions described		
20	in section 501(c) of the Code (other than section 501(c)(3)) or in sect	· · · · · · · · · · · · · · · · · · ·	mons described	Yes X	No
	b If "Yes," complete the following schedule.	1011 027 :	<u>-</u>	165	- INO
	(a) Name of organization	(b) Type of organization	(c) Description of relations	ship	
	N/A	(-)		<del></del>	
				-	
	Under penalties of perjury, I declare that I have examined this return, including acco			true, correct,	
	and complete Declaration of preparer (other than taxpayer or fiduciary) is based on	8/-/	as any knowledge		
	// Ly of Jaleyan	0/1 //0	► PRESIDENT		
ere	Signature of officer or trustee	Date	Title		
Ξ	Preparer's		1 112	er's identifying nur	nber
Sign Here	signature signature	8/	Y/610   self- employed ▶ □		
•	Firm's name (or yours KHSK CPAS, INC.		EIN ▶		
	្រី ខ្លី if self-employed).	., SUITE 543			
	address, and ZIP code HONOLULU, HAWAII 96	814		<u>596-207</u>	
	· <del></del>		Fe	orm <b>990-PF</b>	(2009)

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#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

➤ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

R	OY AND HILDA TAKEYAMA FOUNDATION	99-0342196					
Organization type (check							
Filers of:	Section:						
Form 990 or 990-EZ 501(c)( ) (enter number) organization							
	4947(a)(1) nonexempt chantable trust <b>not</b> treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note. Only a section 501(constant of the section 501)  General Rule  X For an organization	is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  (2)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, (2)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, (3)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, (3)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, (3)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule.  (a) Organization can check boxes for both the General Rule and a Special Rule.  (b) Organization can check boxes for both the General Rule and a Special Rule.  (c) Organization can check boxes for both the General Rule and a Special Rule.  (c) Organization can check boxes for both the General Rule and a Special Rule.  (c) Organization can check boxes for both the General Rule and a Special Rule.  (d) Organization can check boxes for both the General Rule and a Special Rule.  (d) Organization can check boxes for both the General Rule and a Special Rule.  (e) Organization can check boxes for both the General Rule and a Special Rule.  (e) Organization can check boxes for both the General Rule and a Special Rule.  (f) Organization can check boxes for both the General Rule and a Special Rule.  (f) Organization can check boxes for both the General Rule and a Special Rule.  (f) Organization can check boxes for both the General Rule and a Special Rule.  (f) Organization can check boxes for boxes for both the General Rule and a Special Rule.  (f) Organization can check boxes for box						
For a section 501 509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the requires (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II.						
aggregate contrib	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III.						
contributions for If this box is chec purpose. Do not d	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contruse exclusively for religious, charitable, etc., purposes, but these contributions did not again the set of the total contributions that were received during the year for an exclusive complete any of the parts unless the <b>General Rule</b> applies to this organization because the, etc., contributions of \$5,000 or more during the year.	ggregate to more than \$1,000. ely religious, charitable, etc,					
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line illing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990, 990-EZ, or 990-PF.

chedule B (F lame of or	Page 1 of 1 of Part I			
.07. 3	·			
<u>≀O⊻ A</u> Part I	ND HILDA TAKEYAMA FOUNDATION  Contributors (see restrictions)		99-0342196	
	Contributors (see instructions)		(-0)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) ns Type of contribution	
1	ROY & HILDA TAKEYAMA		Person X Payroll	
	3767 DIAMOND HEAD ROAD	\$ 100,000	(Complete Part II if there	
	HONOLULU, HI 96816		is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) Type of contribution	
<del></del>		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d)	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part It if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d)  Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II if there is a noncash contribution	

ROY AND HILDA TAKEYAMA FOUNDATION

FORM 990-PF INTEREST ON SAVING	GS AND TEN	IPORARY C	ASH ]	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
CENTRAL PACIFIC BANK MORGAN STANLEY  TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A				2,001		
				5,214.		
FORM 990-PF DIVIDENDS	AND INTER	REST FROM	SEC	JRITIES	STATEMENT	2
SOURCE	GROSS	S AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	)
MORGAN STANLEY		9,584.	-	0.	9,5	84.
TOTAL TO FM 990-PF, PART I, LN	4	9,584.		0.	9,5	84.
FORM 990-PF	OTHER 3	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOK		(B) NET INVEST- MENT INCOME		
MISCELLANEOUS INCOME		5,	884.	0	•	
TOTAL TO FORM 990-PF, PART I, 1	LINE 11 =	5,	884.	0	•	
FORM 990-PF	ACCOUNT	ING FEES		*	STATEMENT	4
	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-			
ACCOUNTING FEES	3,400	<del>-</del>	0 .			0.
TO FORM 990-PF, PG 1, LN 16B	3,400		0 .			0.

FORM 990-PF	TAX	ES	STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
FILING FEES	503.	0.		0.		
TO FORM 990-PF, PG 1, LN 18	503.	0.		0.		
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
OFFICE EXPENSE	19.	0.	· -	0.		
TO FORM 990-PF, PG 1, LN 23	19.	0.		0.		
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7		
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE		
MORGAN STANLEY 029135 MORGAN STANLEY 036312 MORGAN STANLEY 035056			98,600. 262,652. 340,906.	98,600. 187,232. 328,700.		
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		702,158.	614,532.		

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	8
NAME OF CONTRIBUTOR	ADDRESS		
JAN N SULLIVAN	828 FORT STREET MALL STE 610 HONOLULU, HI 96813		
DAVID Y TAKEYAMA	828 FORT STREET MALL STE 610 HONOLULU, HI 96813		
ROY Y TAKEYAMA	3767 DIAMOND HEAD ROAD HONOLULU, HI 96816		
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT	9

NAME OF MANAGER

ROY Y TAKEYAMA HILDA Y TAKEYAMA

99-0342196

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 10 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ROY Y TAKEYAMA 828 FORT STREET MALL STE 610 HONOLULU, HI 96813

TELEPHONE NUMBER

(808)526-2416

FORM AND CONTENT OF APPLICATIONS

REQUESTS SHOULD BE IN WRITING AND DESCRIBE THE ORGANIZATION'S EXEMPT PURPOSE

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

Form **8868** 

(Rev April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

-			
	you are filing for an Automatic 3-Month Extension, complete only Part I and check this box		<b>▶ X</b>
	you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this		
	not complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	ea Fo	rm 8808
Pa	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		
A co	prporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	_
Part	ionly		▶ □
	other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar The income tax retums.	exter	sion of time
noted not a you r	ctronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension deleted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or compust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic fileters, gov/efile and click on e-file for Charities & Nonprofits.	cally if	f (1) you want the additional ated Form 990-T. Instead,
Гуре	e or Name of Exempt Organization	Emp	loyer identification number
print	ROY AND HILDA TAKEYAMA FOUNDATION	q	9-0342196
File by		د	J 03441JU
iling y eturn	your   828 FORT STREET MALL, NO. 610		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  HONOLULU, HI 96813	_	
Che	ck type of return to be filed (file a separate application for each return):		
	Form 990 Form 990-T (corporation) Form 47	20	
	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52		
	Form 990-EZ Form 990-T (trust other than above) Form 60	69	
X	Form 990-PF	70	
	ROY TAKEYAMA The books are in the care of   828 FORT STREET MALL STE 610 - HONOLULU Telephone No.   (808)526-2416 FAX No.	, н	I 96813
lf If	f the organization does not have an office or place of business in the United States, check this box fithis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for part of the group, check this box    If it is for part of the group, check this box    and attach a list with the names and EINs of all		
lf If	f this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this	memb I	ers the extension will cover.
If If DOX	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt AUGUST 15, 2010 , to file the exempt organization return for the organization named a is for the organization's return for:  X calendar year 2009 or	memb	ers the extension will cover.
If If DOX	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the lift is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt AUGUST 15, 2010 , to file the exempt organization return for the organization named a is for the organization's return for:  X calendar year 2009 or and ending and ending and ending If this tax year is for less than 12 months, check reason Initial return Final return	memb	ers the extension will cover.  The extension  Change in accounting period
If	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the lift is for part of the group, check this box and attach a list with the names and EINs of all I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt AUGUST 15, 2010 , to file the exempt organization return for the organization named a is for the organization's return for:  X calendar year 2009 or and ending and ending and ending If this tax year is for less than 12 months, check reason Initial return Final return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	memb	ers the extension will cover.  The extension  Change in accounting period
• If • If 1000x 1	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is form 990-T, and attach a list with the names and EINs of all lift is form 990-T, and ending and attach a list with the names and EINs of all lift is form 990-T, and ending and attach a list with the names and EINs of all lift is form 990-T, and attach a list with the names and EINs of all lift is form 990-T, and attach a list with the names and EINs of all lift is form 990-T, and attach a list with the names and EINs of all lift the paper. If this application is for Form 990-BL, 990-F, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	memb l bove.	ers the extension will cover.  The extension  Change in accounting period  \$ 0.
o if open	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group. It is for the organization of time unto the authorise and the exempt organization return for the organization named a list or the organization is for the organization named and is for the organization is return for:    X	memb	ers the extension will cover.  The extension  Change in accounting period  \$ 0.
• If • If box 1	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group. It is for the organization of time untages and it is for the organization's return for:    X   Calendar year   2009   or	memb l bove.	ers the extension will cover.  The extension  Change in accounting period  \$ 0.
o if toox	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group, check this box and attach a list with the names and EINs of all lift is for part of the group. It is for the organization of time unto the authorise and the exempt organization return for the organization named a list or the organization is for the organization named and is for the organization is return for:    X	memb l bove.	The extension  Change in accounting period

Form 88	368 (Rev. 4-2009)			Page 2
e If yo	u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	ox	· -	▶ X
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form 8	8868	
	u are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Part	The state of the s	opies n	eeded)	<del></del>
Туре о	Name of Exempt Organization	Empl	oyer identifi	cation number
print	ROY AND HILDA TAKEYAMA FOUNDATION		0 02421	106
File by th	O Allembar dans and and an area of a DO beautiful and a second a second and a second a second and a second a second and a second and a second and a		9-03421	190
extended due date		For in	RS use only	
filing the return Se		L		<del></del>
instructio	honolulu, HI 96813			
Check	type of return to be filed (File a separate application for each return):			
	Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A	Fo	rm 5227	Form 8870
F	Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	Fo	rm 6069	
STOP!	Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 8868	
		o.yc	<del></del>	<del>"</del>
. The	ROY TAKEYAMA		- 0001	,
	books are in the care of $\blacktriangleright$ 828 FORT STREET MALL STE 610 - HONOLULU phone No $\blacktriangleright$ (808)526-2416 FAX No. $\blacktriangleright$	, н	1 9081	<u> </u>
	e organization does not have an office or place of business in the United States, check this box		<del></del>	<b>~</b> $\square$
	is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If th	o io for	the whole o	roup shock this
box <b>&gt;</b>				
	request an additional 3-month extension of time until NOVEMBER 15, 2010.	memo	as the exten	31011 13 101
	for calendar year 2009, or other tax year beginning, and ending			
	f this tax year is for less than 12 months, check reason Initial return Final return		Change in ac	counting period
7 5	State in detail why you need the extension		J	<i>3.</i>
<u>:</u>	THE RETURN IS SUBSTANTIALLY COMPLETE. ADDITIONAL TIME		•	
	IS NEEDED TO FINALIZE THE RETURN.			
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
_	onrefundable credits. See instructions.	8a	\$	<u> </u>
	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
	ax payments made Include any prior year overpayment allowed as a credit and any amount paid	<u> </u>		4 500
_	previously with Form 8868	8b	\$	1,688.
	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit		_	•
v	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions Signature and Verification	_8c	<u> </u>	0.
Under p	enalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the	best of	my knowledo	e and belief.
t is true	, correct, and complete, and that Jam authorized to prepare this form.		-1	
Signatu	re ► ACCOUNTANT	<u>Date</u>	<b>&gt;</b> //~	8/-010
			Form 8	868 (Rev. 4-2009)